

<i>SERFF Tracking Number:</i>	<i>MUTM-127327151</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>United of Omaha Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>49345</i>
<i>Company Tracking Number:</i>	<i>ASHLEY WILLIAMS</i>		
<i>TOI:</i>	<i>MS08I Individual Medicare Supplement -</i>	<i>Sub-TOI:</i>	<i>MS08I.001 Plan A 2010</i>
	<i>Standard Plans 2010</i>		
<i>Product Name:</i>	<i>Medicare Supplement Advertising - AFN43824</i>		
<i>Project Name/Number:</i>	<i>Medicare Supplement Advertising/AFN43824</i>		

Filing at a Glance

Company: United of Omaha Life Insurance Company

Product Name: Medicare Supplement SERFF Tr Num: MUTM-127327151 State: Arkansas
Advertising - AFN43824

TOI: MS08I Individual Medicare Supplement - SERFF Status: Closed-Filed- State Tr Num: 49345
Standard Plans 2010 Closed

Sub-TOI: MS08I.001 Plan A 2010 Co Tr Num: ASHLEY WILLIAMS State Status: Filed-Closed
Filing Type: Advertisement Reviewer(s): Stephanie Fowler

Author: Ashley Williams Disposition Date: 08/17/2011
Date Submitted: 07/19/2011 Disposition Status: Filed-Closed

Implementation Date Requested: Implementation Date:

State Filing Description:

General Information

Project Name: Medicare Supplement Advertising

Project Number: AFN43824

Requested Filing Mode:

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Status of Filing in Domicile:

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Individual

Individual Market Type:

Filing Status Changed: 08/17/2011

State Status Changed: 08/17/2011

Created By: Ashley Williams

Corresponding Filing Tracking Number:

Deemer Date:

Submitted By: Ashley Williams

Filing Description:

NAIC #261-69868

FEIN #47-0322111

United of Omaha Life Insurance Company

Direct Response Advertising

Medicare Supplement Advertising

Newspaper Ad: AFN43824

Enclosed for review by your Department is a copy of the above-captioned advertising. The form is new and is not intended to replace any previously approved form. It will be used with appropriate approved forms in your state.

SERFF Tracking Number: MUTM-127327151 State: Arkansas
Filing Company: United of Omaha Life Insurance Company State Tracking Number: 49345
Company Tracking Number: ASHLEY WILLIAMS
TOI: MS08I Individual Medicare Supplement - Sub-TOI: MS08I.001 Plan A 2010
Standard Plans 2010
Product Name: Medicare Supplement Advertising - AFN43824
Project Name/Number: Medicare Supplement Advertising/AFN43824

We request that any information in brackets be considered variable. A Memorandum of Variable Material describing the variable items is attached.

Thank you for the review of this filing.

Sincerely,

Corporate Compliance and Ethics Division
For Questions, please contact Carly Cole
Phone: 402-351-2476; Fax: 402-351-5298
E-mail: advfilings@mutualofomaha.com

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Company and Contact

Filing Contact Information

Carly Cole, Product & Advertising Compliance carly.cole@mutualofomaha.com
Consultant

Mutual of Omaha 402-351-2476 [Phone]
Mutual of Omaha Plaza 402-351-5298 [FAX]
Omaha, NE 68175

Filing Company Information

United of Omaha Life Insurance Company	CoCode: 69868	State of Domicile: Nebraska
Mutual of Omaha Plaza	Group Code: 261	Company Type: Life Insurance
Omaha, NE 68175	Group Name:	State ID Number:
(402) 351-6910 ext. [Phone]	FEIN Number: 47-0322111	

Filing Fees

Fee Required? Yes
Fee Amount: \$50.00
Retaliatory? No
Fee Explanation:

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
United of Omaha Life Insurance Company	\$50.00	07/19/2011	49910885

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed-Closed	Stephanie Fowler	08/17/2011	08/17/2011

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Disposition

Disposition Date: 08/17/2011

Implementation Date:

Status: Filed-Closed

Comment:

Rate data does NOT apply to filing.

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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Memorandum of Variability	Filed-Closed	Yes
Form	Newspaper Ad	Filed-Closed	Yes

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Filing Company: United of Omaha Life Insurance Company State Tracking Number: 49345

Company Tracking Number: ASHLEY WILLIAMS

TOI: MS08I Individual Medicare Supplement - Sub-TOI: MS08I.001 Plan A 2010
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Form Schedule

Lead Form Number: AFN43824

Schedule Item Status	Form Number	Form Type Form Name	Action	Action Specific Data	Readability	Attachment
Filed-Closed 08/17/2011	AFN43824	Advertising Newspaper Ad	Initial		0.000	AFN43824 - no BRC - logo on the bottom_FINALE.pdf

ARE YOU MEDICARE ELIGIBLE?

3 things to consider when choosing a Medicare supplement insurance policy...

**PRICE!
PRICE!
PRICE!**

Medicare supplement insurance from a company you can trust. Add our friendly personal customer service and you have the financial value and help with the security you seek.

To receive your **FREE** no-obligation Medicare supplement information kit:

Call: [1-800-228-7104] to speak with a licensed agent or

Visit: [www.medsupinsert.com]

Call **Now** and Apply

A friendly licensed agent can take your application right over the phone or send you a free no-obligation Medicare supplement information kit.

[1-800-228-7104]

Not ready to call now?

Visit:

[www.medsupinsert.com]

to request your **FREE**
Medicare supplement
information kit



**UNITED OF OMAHA LIFE
INSURANCE COMPANY**
A MUTUAL OF OMAHA COMPANY

Let Us Help You Choose The Right Medicare supplement Insurance Policy

Medicare supplement insurance
from a company you can trust.



Call Toll-Free Today!

[1-800-228-7104]

We can take your application
right over the phone.



**UNITED OF OMAHA LIFE
INSURANCE COMPANY**
A MUTUAL of OMAHA COMPANY

Medicare supplement insurance policies are underwritten by United of Omaha Life Insurance Company, Mutual of Omaha Plaza, Omaha, NE 68175; 1-800-228-7104. **United of Omaha Life Insurance Company, its Medicare supplement insurance policies and its licensed insurance agents are not connected with, endorsed by, affiliated with or sponsored by the federal or state government, the Social Security Administration, the Centers for Medicare and Medicaid Services, the Department of Health and Human Services or the federal Medicare program.** United of Omaha Life Insurance Company is licensed nationwide, except in NY and is solely responsible for its financial and contractual obligations. Policy forms: UM20, UM21, UM22, UM23, UM24 and UM30 or state equivalent. In ID: UM20-21698, UM23-21699, UM24-21700 and UM30-22551; in NC: UM20-21719NC, UM23-21720NC, UM24-21721NC and UM30-22567NC; in OK: UM20-21746, UM23-21747, UM24-21748 and UM30-22579; in OR: UM20R-21749, UM23R-21750, UM24R-21751 and UM30R-22581; in TX: UM20-21760, UM23-21761, UM24-21762 and UM30-22587; in WI: UM25. Not all policy forms may be available in every state. For costs and further details of the coverage, including exclusions, any reductions or limitations and terms under which the policy may be continued in force, see your agent or contact the company. An outline of coverage is available upon request. In some states, Medicare supplement policies are available to those eligible for Medicare due to a disability, regardless of age. In TX: If you receive Medicare benefits because of a disability, you may apply for a Medicare supplement Plan A; regardless of your age. **IMPORTANT NOTICE** - "A CONSUMER'S GUIDE TO HEALTH INSURANCE FOR PEOPLE ELIGIBLE FOR MEDICARE" MAY BE OBTAINED FROM YOUR LOCAL SOCIAL SECURITY OFFICE OR FROM UNITED OF OMAHA LIFE INSURANCE COMPANY.

GA residents: THIS IS A LIMITED POLICY DESIGNED TO COVER ONLY THOSE EXPENSES WHICH MEDICARE DOES NOT COVER.

OH residents: Licensed insurance agents are authorized to sell this Medicare supplement insurance policy on behalf of United of Omaha. This information may be verified by contacting the Ohio Department of Insurance at 50 W Town St., 3rd Fl, Suite 300, Columbus, OH 43215 or call 1-800-688-1526.

This is a solicitation of insurance and a licensed agent may contact you by telephone to provide additional information.

AFN43824

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Supporting Document Schedules

		Item Status:	Status
Satisfied - Item:	Memorandum of Variability	Filed-Closed	Date: 08/17/2011
Comments:			
Attachment:			
AFN43824 MOV.pdf			

Variable Material for Advertising Form

AFN43824

The following information in the aforementioned advertisement is bracketed to denote variable material.

Location of Variability on Ad	Variable Description
Front Side – Middle	Phone number is variable: [1-800-228-7104]
Front Side – Middle	Web URL is variable: [www.medsuppinsert.com] - Only an approved web site will be used
Front Side – Lower Left	Phone number is variable: [1-800-228-7104]
Front Side – Lower Right	Web URL is variable: [www.medsuppinsert.com] - Only an approved web site will be used
Back Side - Middle	Phone number is variable: [1-800-228-7104]